Society was making short payment to Parcel Porters at Unnao for which a fine of Rs. 200/-, was imposed; and

(d) If so, what is the manner in which Government propose to deal with such offenders?

THE MINISTER OF STATE OF THE MINISTRY OF RAILWAYS (SHRI MADHAVRAO SCINDIA): (a) The performance and conduct of the Society was not considered satisfactory as they had got the Railway Administration involved in principal employer liability for non-payment of fair wages to the workers.

(b) The Society has not been formally blacklisted on Allahabad Division. However, existing contracts for coal handling and related works at Kanpur and Aligarh were terminated on expiry of their term.

(c) Yes, Sir.

(d) Action is taken in accordance with the provisions of the contract executed. Performance of the Society is reviewed before the contract is renewed.

Telecom commission

1196. SHRI V. NARAYANASAMY: Will the Minister of COMMUNICATIONS be pleased to state:

(a) whether it is a fact that constituting telecom commission is being stalled by the bureaucratic approach insisting for the status of Secretary to Government of India before they agree to head the sub-sections of the commissions; and

(b) if so, what steps that Government have taken to constitute telecom commission, overcoming the obstacle?

THE MINISTER OF STATE IN THE MINISTRY OF COMMUNICATIONS (SHRI SONTOSH MOHAN DEV): (a) No, Sir.

(b) The proposals were, examined by § a Committee of Secretaries, Based on the recommendations of the Com- mitee a memorandum approved by the Minister for Communications has i been submitted for ronsideratiroa of the Cabinet.

Crown and bridge technique in dental treatment

1197. SHRI ATAL BIHARI VAJ PAYEE: Will the Minister of HEALTH j AND FAMILY WELFARE be pleased to state:

(a) whether materials for casting crowns and bridges for providing supporv to teeth and 'dentures and for the re-growth of bone around loose teeth have been developed alongwith the technical knowhow for their manufacture and for fixing bone plates indigenously, if so, at which places in India they are available at commercial scale for use of general public; and

(b) the outline of plans to develop dentistry technology in India during the current year and the next year?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KHA PARDE): (a) As per available information, alloys used for casting metal crowns and bridges etc. are not produced in India and are imported from USA/Europe.

(b) There are no such plans to develop; 'dentistry technology in the immediate future, in India.

Bleak Scenario of 'Health for all by 2000 '

1198. SHRI V. NARAYANASAMY: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

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(a) whether the Government's attentior has been drawn to the news-item which, appeared in *Indian Express* dated 27th May, 1987 under the caption "Health for all by 2000 A.D. Scenario bleak", *attri*-buting the Scenario to various reasons; and

(b) whether Government have reviewed the said Policy for over-coming the 'difficulties?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KHAPARDE): (a) and (b) Yes, Sir. The position was reviewed in the State Health Mjafetets' Conference held on 25th May, 1987. Realising that the major share of resources for primary health care infras-tructure comes from State sector, the Con-ference. recomended to the States and U.Ts-

(1) to esure timely achievement of targe;--, in respect of establishment of Primarj Health Centres and Sub-Centres;

(2) to ensure that the essential institutional and residential 'facilities are provided for the medieal and para-medical staff,-specially in remote and peripheral ureas;

(3) to ensure that the required at Primary Health Centres and Sub-Centres level is placed in position promptly and is not changed too frequently;

.(4) to lay erephasi3 on ins pr-tive and promotive aspects of primary health care services;

(5) to provide adequate facilities for basic training and continuing education for all personnel;

*(6) to closely involve the medical colleges, the training institutions of para-medical workers in the primary health care delivery system;

(7) to maintain adequate supply of equipmen's and to keep them functional;

(8) to ensure availability of essential drugs in all rural institutions particularly for the weaker sections of the population.

Universal Immunization Scheme

1199. SHRI V. NARAYANASAMY: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that the Universal Immunization Scheme introduce'd by Government and which is ihree years to complete the target is suffering due to slow progress; and

(b) whether Government have considered the delay in implementation of the Immunization Scheme and issued directions for taking remedial measures to the S authorities?

THE MINISTER OF STATE. IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KHAPARDE): (a) and (b) No, Sir. The Universal Immuniza'ion Programme started in 1985, except for immunization against measles, progressing satisfactorily. Even in respect of immunization against measles, which was introduced for the first time in the country in 1985-86, the achievement has been encouraging in 1986-87. The Programme is being imple, mented throug' the staff of the State Governments. The States are being assisted and constantly requested to gear up their machinery to ensure the achievement of the targe s under the Programme.

Inadequate casualty wards in the Delhi hospitals

1200. SHRI V. NARAYANASAMY: Will the Mini HEALTH A
FAMILY WELFARE be pleased to state

(a) whether it is a fact that the casualty ward in various city hospitals in Delhi have not been kept ready to meet the emergency situation;

(b) whether it is a fact that the victims of terrorists' attack who had been brought to Moolchand Khairati Ram Cho-wdhry Hospital on 13th June, 1987 suffered due to lack of experienced doc'ors and other facilities; and

(c) if so, what steps Government have taken to keep the casualty ward realdy to meet the emergency situation?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KHAPARDE) (a) and (b) No, Sir. All Government Hospitals of Delhi are fully